

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	MC098Y
	First Named Inventor	Michael Boyd, et al.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CATHEPSIN CYSTEINE PROTEASE INHIBITORS

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/529,254	12/12/2003	MC098PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☒ Practitioners Associated with the Customer Number **000210**
OR
☐ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number
Nicole M. Beeler	45,194	Mark R. Daniel	31,913

Direct all correspondence to: ☒ Customer Number **000210**

Name	Nicole M. Beeler				
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Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-1077	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Michael	Boyd

Inventor's Signature	<i>Michael Boyd</i>	Date	Nov 15, 2004
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Residence: City	Montreal	State	Quebec	Country	Canada	Citizenship	Canadian
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Mailing Address	Merck Frosst Canada & Co., 16711 Trans-Canada Highway				
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City	Kirkland, Quebec	State		ZIP	H9H 3L1	Country	CANADA
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☒ Additional inventors are being named on the 2 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

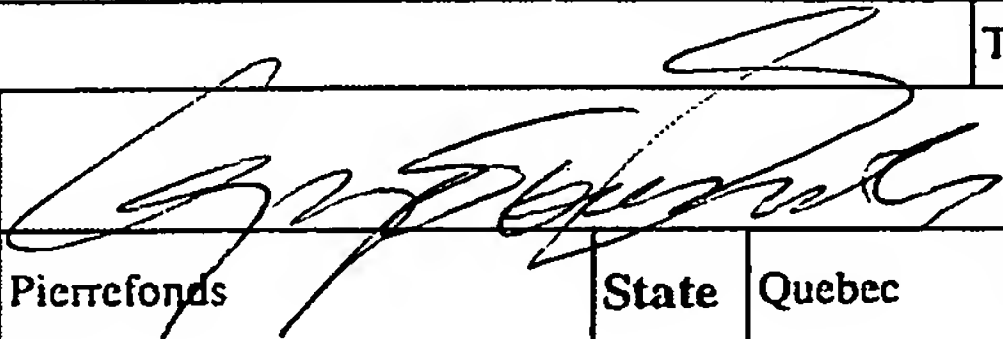
DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name (first and middle [if any])				Family Name or Surname												
Cheuk				Lau												
Inventor's Signature		<i>C. K. Lau</i>				Date		<i>Nov. 15, 2004</i>								
Residence: City		Ile Bizard		State		Quebec		Country		Canada		Citizenship		Canadian		
Mailing Address		Merck Frosst Canada & Co., 16711 Trans-Canada Highway														
City		Kirkland, Quebec			State				ZIP		H9H 3L1		Country		CANADA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name (first and middle [if any])				Family Name or Surname												
Christophe				Mellon												
Inventor's Signature		<i>Christophe Mellon</i>						Date		<i>Nov. 12 2004</i>						
Residence: City		L'Ile Bizard		State				Country		Canada		Citizenship		Canadian		
Mailing Address		Merck Frosst Canada & Co., 16711 Trans-Canada Highway														
City		Kirkland, Quebec			State				ZIP		H9H 3L1		Country		CANADA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name (first and middle [if any])				Family Name or Surname												
Bruno				Roy												
Inventor's Signature		<i>Bruno Roy</i>						Date		<i>Nov 12, 2004</i>						
Residence: City		Ile Bizard		State		Quebec		Country		Canada		Citizenship		Canadian		
Mailing Address		Merck Frosst Canada & Co., 16711 Trans-Canada Highway														
City		Kirkland, Quebec			State				ZIP		H9H 3L1		Country		CANADA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name (first and middle [if any])				Family Name or Surname												
John				Scheigetz												
Inventor's Signature		<i>John Scheigetz</i>						Date		<i>Nov 12, 2004</i>						
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Mailing Address		Merck Frosst Canada & Co., 16711 Trans-Canada Highway														
City		Kirkland, Quebec			State				ZIP		H9H 3L1		Country		CANADA	

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**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name (first and middle [if any])				Family Name or Surname													
Vouy Linh				Truong													
Inventor's Signature					Date		Nov 12 2004										
Residence: City		Pierrefonds		State		Quebec		Country		Canada		Citizenship		Canadian			
Mailing Address		Merck Frosst Canada & Co., 16711 Trans-Canada Highway															
City		Kirkland, Quebec				State				ZIP		H9H 3L1		Country		CANADA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name (first and middle [if any])				Family Name or Surname													
Inventor's Signature								Date									
Residence: City				State				Country				Citizenship					
Mailing Address																	
City		Rahway				State		NJ		ZIP		07065-0907		Country			
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Residence: City				State				Country				Citizenship					
Mailing Address																	
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Inventor's Signature								Date									
Residence: City				State				Country				Citizenship					
Mailing Address																	
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Inventor's Signature								Date									
Residence: City				State				Country				Citizenship					
Mailing Address																	
City		Rahway				State		NJ		ZIP		07065-0907		Country			